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FF1AN060.PDF

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**2 / 84**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

MIKE GRAVEL FOR PRESIDENT 2008

Report Covering the Period

From: 01/01/2008

To: 03/31/2008

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	46739.00	0.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		46739.00	0.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Loans	.....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	0.00	0.00
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		0.00	0.00
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	34.56	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	46773.56	0.00
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	.....	40317.65	0.00
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	0.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	0.00	0.00
29. OTHER DISBURSEMENTS	.....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	40317.65	0.00
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

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1. NAME OF COMMITTEE (in full)**MIKE GRAVEL FOR PRESIDENT 2008****ADDRESS (number and street)**

1600 N OAK ST #1412

CITY, STATE, and ZIP CODE

ARLINGTON

VA

22209

2. IDENTIFICATION NUMBER

C00423202

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

Form/Schedule : **F3PA**

Transaction ID :

Over the course of January 01 through March 31, 2008, Dickstein Shapiro LLP provided \$5000 in legal services to the Presidential Campaign. This reflects general legal work on matching fund application representation and preparation of legal response regarding the Federal Election Commission initial rejection of the Campaign qualification for matching fund. The services were provided on various dates by Scott Thomas and Lauren Hancock.

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Donna Adams

Mailing Address

2454B Westcliffe Ln.

City

Walnut Creek

State

CA

Zip Code

94597

FEC ID number of contributing
federal political committee.

Name of Employer

Self-employed

Occupation

Caregiver

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

563.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 8

Amount of Each Receipt this Period

563.00

CONTRIBUTION

Transaction ID: SA17A.18906

B.

Full Name (Last, First, Middle Initial)

Rusman R. Anderson

Mailing Address

PO Box 166

City

Bayside

State

CA

Zip Code

95524

FEC ID number of contributing
federal political committee.

Name of Employer

Nine Stars Grp. (self)|Se-
nior Program

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18866

C.

Full Name (Last, First, Middle Initial)

ANONYMOUS ANONYMOUS

Mailing Address

UNKNOWN

City

UNKNOWN

State

Zip Code

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 7 / 2 0 0 8

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Transaction ID: SA17A.20630

SUBTOTAL of Receipts This Page (optional)

843.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)
MILLER ANTHONETTE

Mailing Address
3702 HUNTINGTON ST. NW

City State Zip Code
WASHINGTON DC 20015

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 8 / 2 0 0 8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.20623

B.

Full Name (Last, First, Middle Initial)
AZLAIA ARMED

Mailing Address
140 ARMSTRONG COVE

City State Zip Code
BUDA TX 78610

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.20618

C.

Full Name (Last, First, Middle Initial)
Shawn Beltz

Mailing Address
4738 s 6th st

City State Zip Code
Louisville KY 40214

FEC ID number of contributing
federal political committee.

Name of Employer
CompuCom Systems

Occupation
system admin

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.19201

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)
GRAY BORNE

Mailing Address
P.O. BOX 642

City State Zip Code
DRIGGS ID 83422

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.20615

B.

Full Name (Last, First, Middle Initial)
Lemke Brett

Mailing Address
1900 H Street #2

City State Zip Code
Sacramento CA 95811

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.93

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

260.93

CONTRIBUTION

Transaction ID: SA17A.18307

C.

Full Name (Last, First, Middle Initial)
MICHAEL BROWN

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2.50

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 8

Amount of Each Receipt this Period

2.50

CONTRIBUTION

Transaction ID: SA17A.20628

SUBTOTAL of Receipts This Page (optional)

288.43

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Matthew Calabaza

Mailing Address

POB 5337

City

Bernalillo

State

NM

Zip Code

87004

FEC ID number of contributing
federal political committee.

Name of Employer
FAA

Occupation
Tech

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 9 / 2 0 0 8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.18966

B.

Full Name (Last, First, Middle Initial)

HEITSCH CHARLES

Mailing Address

13321 STATE HWY N

City

BOURBON

State

MO

Zip Code

65441

FEC ID number of contributing
federal political committee.

Name of Employer
RETIRED

Occupation
chemist

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 9 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18504

C.

Full Name (Last, First, Middle Initial)

Oyog David

Mailing Address

2437 W Monterey Ave

City

Stockton

State

CA

Zip Code

95204

FEC ID number of contributing
federal political committee.

Name of Employer
AT&T

Occupation
operator

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 9 / 2 0 0 8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.18270

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)
roger dittmann

Mailing Address

California Stat University

Physics Dept

City

State

Zip Code

Fullerton

CA

92834

FEC ID number of contributing
federal political committee.

Name of Employer
Magnetecs corporation

Occupation
nuclear physicist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 8 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.19342

B.

Full Name (Last, First, Middle Initial)
Shelagh Eldon

Mailing Address

303 Velocity Way

City

State

Zip Code

Foster City

CA

94404

FEC ID number of contributing
federal political committee.

Name of Employer
EFI

Occupation
staff

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Transaction ID: SA17A.19476

C.

Full Name (Last, First, Middle Initial)
DARIUS ENGEL

Mailing Address

P.O. Box 117330

City

State

Zip Code

GAINSVILLE

FL

32611

FEC ID number of contributing
federal political committee.

Name of Employer
UNIVERSITY OF FLORIDA

Occupation
RESERCHER

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

5.00

DONATION

Transaction ID: SA17A.5057

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 84

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Hugh Giordano Mailing Address 425 Conarroe Street City State Zip Code Philadelphia PA 19128 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 9 / 2 0 0 8 Amount of Each Receipt this Period 257.49 CONTRIBUTION Transaction ID: SA17A.18586
B. Full Name (Last, First, Middle Initial) David Glatstein Mailing Address Gracie Station, P.O. Box 1261 City State Zip Code New York NY 10028 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 9 / 2 0 0 8 Amount of Each Receipt this Period 400.00 CONTRIBUTION Transaction ID: SA17A.18819
C. Full Name (Last, First, Middle Initial) james goller Mailing Address 696 no. robertson Blvd City State Zip Code West Hollywood CA 90069 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 5 / 2 0 0 8 Amount of Each Receipt this Period 2300.00 CONTRIBUTION Transaction ID: SA17A.19279

SUBTOTAL of Receipts This Page (optional)

2957.49

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 84

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) james goller Mailing Address 696 no. robertson Blvd City State Zip Code West Hollywood CA 90069 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8 Amount of Each Receipt this Period 159.40 CONTRIBUTION
Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2459.40		Transaction ID: SA17A.18912
B. Full Name (Last, First, Middle Initial) nathan goller Mailing Address 655 n. robertson blvd City State Zip Code west hollywood CA 90069 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 8 Amount of Each Receipt this Period 2300.00 CONTRIBUTION
Name of Employer Occupation None ATTORNEY Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00		Transaction ID: SA17A.19515
C. Full Name (Last, First, Middle Initial) THORON GRENVILLE Mailing Address P.O.BOX 279 City State Zip Code DUBLIN NH 03444 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 8 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer Occupation SELF GRAPHIC DESIGNER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Transaction ID: SA17A.18514

SUBTOTAL of Receipts This Page (optional)

2959.40

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Jason Greschler

Mailing Address

2514 Clairemont Dr #311

City

San Diego

State

CA

Zip Code

92117

FEC ID number of contributing
federal political committee.

Name of Employer
Intuit

Occupation
staff

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.19538

B.

Full Name (Last, First, Middle Initial)

RAY HRYCKO

Mailing Address

19822 SEMINDE

City

REDFORD

State

MI

Zip Code

48240

FEC ID number of contributing
federal political committee.

Name of Employer
CHIBA HIGH SCHOOL

Occupation
TEACHER

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

480.00

CONTRIBUTION

Transaction ID: SA17A.20611

C.

Full Name (Last, First, Middle Initial)

Jerold Huebner

Mailing Address

449 Troutman St #33

City

Brooklyn

State

NY

Zip Code

11237

FEC ID number of contributing
federal political committee.

Name of Employer
Simpson Thacher & Bartle-
tt LLP

Occupation
paralegal

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Transaction ID: SA17A.19530

SUBTOTAL of Receipts This Page (optional)

655.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 84

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Hicks Jacqueline

Mailing Address

4528 Niagara

City

San Diego

State

CA

Zip Code

92107

FEC ID number of contributing
federal political committee.Name of Employer
Director; Public Charter
High School

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Occupation

Cortez Hill Academy

Election Cycle-to-Date ▼

25.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	8

Amount of Each Receipt this Period

25.00

CONTRIBUTION - ACTLUE

Transaction ID: SA17A.20613

B.

Full Name (Last, First, Middle Initial)

eugene jaleski

Mailing Address

671 cedar street

City

longboat key

State

FL

Zip Code

34228

FEC ID number of contributing
federal political committee.Name of Employer
retired

Occupation

computer systems designer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.19464

C.

Full Name (Last, First, Middle Initial)

Goodner James

Mailing Address

134 Beverly Road

City

West Palm Beach

State

FL

Zip Code

33405

FEC ID number of contributing
federal political committee.Name of Employer
Maz Energy, Inc.

Occupation

Chief Financial Officer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	0	8

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.18439

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 84

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

HURT JAMES

Mailing Address

P.O. BOX 322

City

SAVOY

State

IL

Zip Code

61874

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	0	8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.20622

B.

Full Name (Last, First, Middle Initial)

adler jamie

Mailing Address

8772 Beverly Boulevard

City

Los Angeles

State

CA

Zip Code

90048

FEC ID number of contributing
federal political committee.

Name of Employer

phyllis morris

Occupation

designer

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	0	8

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.18320

C.

Full Name (Last, First, Middle Initial)

Peter Jenkins

Mailing Address

8950 Myrtle Drive

City

Douglasville

State

GA

Zip Code

30134

FEC ID number of contributing
federal political committee.

Name of Employer

U.S. Govt.

Occupation

Administrative

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	0	8

Amount of Each Receipt this Period

77.00

CONTRIBUTION

Transaction ID: SA17A.19455

SUBTOTAL of Receipts This Page (optional)

2427.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 84

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Comeau Justin

Mailing Address

26 Joseph Street

City

Medford

State

MA

Zip Code

02155

FEC ID number of contributing
federal political committee.Name of Employer
St. Ann's Home

Occupation

Child Care Worker

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	0	8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18487

B.

Full Name (Last, First, Middle Initial)

Hall Kern

Mailing Address

11 Brookmeade Ct.

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing
federal political committee.Name of Employer
none

Occupation

retired

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	4	/	2	0	0	8

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.19027

C.

Full Name (Last, First, Middle Initial)

SARAH BARBARA MALERSTER

Mailing Address

18 PARNASSUS AVE

City

SAN FRANCISCO

State

CA

Zip Code

94117

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	0	8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.20620

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 84

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

melinda mcall

Mailing Address

978 ryan road

City

florence

State

MA

Zip Code

01062

FEC ID number of contributing
federal political committee.Name of Employer
four rivers charter school
teacher

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	0	/	2	0	0	8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.19152

B.

Full Name (Last, First, Middle Initial)

EARL MCDONALD

Mailing Address

5456 BEAUSAID BLVD

City

VIRGINIA BEACH

State

VA

Zip Code

23464

FEC ID number of contributing
federal political committee.Name of Employer
NONEOccupation
RETIRED

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	7	/	2	0	0	8

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Transaction ID: SA17A.20626

C.

Full Name (Last, First, Middle Initial)

Carol Mullen

Mailing Address

618 Tennyson Ave

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.Name of Employer
noneOccupation
investors

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	4	/	2	0	0	8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18703

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 84

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)
GURIEN NATHANIEL

Mailing Address
P.O.BOX 331

City State Zip Code
Kearsarge NH 03847

FEC ID number of contributing
federal political committee.

Name of Employer
Entrepreneur

Occupation
HiFi Trader, Ltd.

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.18518

B.

Full Name (Last, First, Middle Initial)
Ikuko Nezaki

Mailing Address
21-40Kamitamari, Tamari,

City State Zip Code
Niihari

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
100.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.18488

C.

Full Name (Last, First, Middle Initial)
THERESA O'DELL

Mailing Address
22211 SOUTH ORE ROAD

City State Zip Code
HARRISONVILLE MO 64701

FEC ID number of contributing
federal political committee.

Name of Employer
USDA|Computer Specialist

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 6 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.19300

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 84

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JOE RAMBI

Mailing Address

46 N. DISBROW HILL RD

City

JAMESBURG

State

NJ

Zip Code

08831

FEC ID number of contributing
federal political committee.Name of Employer
NONEOccupation
NONE

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	0	8

Amount of Each Receipt this Period

4.00

CONTRIBUTION

Transaction ID: SA17A.20609

B.

Full Name (Last, First, Middle Initial)

BURTON SARAH

Mailing Address

USF HOLLY DR

City

TAMPA

State

FL

Zip Code

33620

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	7		2	0	0	8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.20617

C.

Full Name (Last, First, Middle Initial)

SUREERATT SMITH

Mailing Address

109 GLEN ECHO DR

City

SMYRNA

State

TN

Zip Code

37167

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	0	8

Amount of Each Receipt this Period

0.00

DONATION

Transaction ID: SA17A.4985

SUBTOTAL of Receipts This Page (optional)

54.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 84

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Leon Story

Mailing Address

102 Park Street

City

North Reading

State

MA

Zip Code

01864

FEC ID number of contributing
federal political committee.Name of Employer
NONEOccupation
RETIRED

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	3	/	2	0	0	8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.19261

B.

Full Name (Last, First, Middle Initial)

Nguyen-Northcott Sven

Mailing Address

287 Winding Brook Drive

City

Leonard

State

MI

Zip Code

48367

FEC ID number of contributing
federal political committee.Name of Employer
SelfOccupation
Inventor/Engineer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	8

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Transaction ID: SA17A.18266

C.

Full Name (Last, First, Middle Initial)

RICHARD & BARBARA THOMAS

Mailing Address

535 ROGERS AVE

City

WEST SPRINGFIELD

State

MA

Zip Code

01089

FEC ID number of contributing
federal political committee.Name of Employer
NONEOccupation
RETIRED

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	0	8

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.20607

SUBTOTAL of Receipts This Page (optional)

2850.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 84

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Thomas Thwaites

Mailing Address

1113 Centre LaneState College

City

State

Zip Code

State College

PA

16801

FEC ID number of contributing
federal political committee.

Name of Employer
None

Occupation
retired

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 3 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18882

B.

Full Name (Last, First, Middle Initial)

MORGAN TIM

Mailing Address

616 NIKKI DVE

City

State

Zip Code

PETALUMA

CA

94954

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.18520

C.

Full Name (Last, First, Middle Initial)

Dana Towle

Mailing Address

920 s 110th st

City

State

Zip Code

Edwardsville

KS

66111

FEC ID number of contributing
federal political committee.

Name of Employer
Dana R Towle MDPC

Occupation
Hand Surgeon

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.19468

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 84

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Aquinas Wijetunga

Mailing Address

665 St Marks Ave. Apt 4D

City

State

Zip Code

Brookline

NY

11216

FEC ID number of contributing
federal political committee.

Name of Employer
none

Occupation
retired

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.19517

B.

Full Name (Last, First, Middle Initial)

Aquinas Wijetunga

Mailing Address

665 St Marks Ave. Apt 4D

City

State

Zip Code

Brookline

NY

11216

FEC ID number of contributing
federal political committee.

Name of Employer
none

Occupation
retired

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.19568

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

17889.32

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 84

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) AMTRAK INTERCITY	Transaction ID: SB23.19722 Date of Disbursement																				
Mailing Address 110 Callahan Drive,	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	3		2	0	0	8												
City Alexandria State VA Zip Code 22301	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>98.00</td> </tr> </table>	98.00																			
98.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) AMTRAK INTERCITY	Transaction ID: SB23.19753 Date of Disbursement																				
Mailing Address 110 Callahan Drive,	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	8		2	0	0	8												
City Alexandria State VA Zip Code 22301	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>268.90</td> </tr> </table>	268.90																			
268.90																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) AT&T MOBILITY	Transaction ID: SB23.19687 Date of Disbursement																				
Mailing Address PO BOX 6463	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	1		2	0	0	8												
City CAROL STREAM State IL Zip Code 60197	Amount of Each Disbursement this Period																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td>350.50</td> </tr> </table>	350.50																			
350.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

717.40

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A. Full Name (Last, First, Middle Initial) AUTHORIZENET CORP</p> <p>Mailing Address 915 SOUTH 500 EAST SUITE 200</p> <p>City AMERICAN FORK State UT Zip Code 84003</p> <p>Purpose of Disbursement CREDIT CARD MERCHANT PROCESSING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.19759 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 71.70</p>
<p>B. Full Name (Last, First, Middle Initial) Petherick Chris</p> <p>Mailing Address 16305 Woodville Rd.</p> <p>City Brandywine State MD Zip Code 20613</p> <p>Purpose of Disbursement CONSULTING CAMPAIGN MAGT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.19735 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p>C. Full Name (Last, First, Middle Initial) CINGULAR WIRELESS</p> <p>Mailing Address P.O.BOX 6463</p> <p>City CAROL STREAM State IL Zip Code 60197</p> <p>Purpose of Disbursement TELEPHONE/INTERNET</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.19750 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 179.14</p>

SUBTOTAL of Disbursements This Page (optional)

1750.84

TOTAL This Period (last page this line number only)

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

181.41

155.00

453.15

FEC Schedule B (Form 3P)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

DELTA AIR

Mailing Address P.O. Box 20532

City
Atlanta

State
GA

Zip Code
30320

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19662

Date of Disbursement

01 / 16 / 2008

Amount of Each Disbursement this Period

40.00

B.

Full Name (Last, First, Middle Initial)

DELTA AIR

Mailing Address P.O. Box 20532

City
Atlanta

State
GA

Zip Code
30320

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19679

Date of Disbursement

01 / 25 / 2008

Amount of Each Disbursement this Period

190.01

C.

Full Name (Last, First, Middle Initial)

DHLWSH

Mailing Address 333 TWIN DOLPHIN DR

City
REDWOOD

State
CA

Zip Code
94065

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19689

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

206.15

SUBTOTAL of Disbursements This Page (optional)

436.16

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR	Transaction ID: SB23.19690 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div>
City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>176.64</div>
B. Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19692 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>137.73</div>
C. Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19694 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>34.52</div>

SUBTOTAL of Disbursements This Page (optional) ►

348.89

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR	Transaction ID: SB23.19712 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 0 8</div> </div>
City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>177.29</div>
B. Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19740 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 5 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>263.63</div>
C. Full Name (Last, First, Middle Initial) DHLWSH Mailing Address 333 TWIN DOLPHIN DR City REDWOOD State CA Zip Code 94065 Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19742 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 5 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>83.17</div>

SUBTOTAL of Disbursements This Page (optional) ►

524.09

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) DHLWSH	Transaction ID: SB23.19743 Date of Disbursement																				
Mailing Address 333 TWIN DOLPHIN DR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	5		2	0	0	8												
City REDWOOD State CA Zip Code 94065	Amount of Each Disbursement this Period																				
Purpose of Disbursement POSTAGE	<table border="1"> <tr> <td>62.55</td> </tr> </table>	62.55																			
62.55																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) DHLWSH	Transaction ID: SB23.19744 Date of Disbursement																				
Mailing Address 333 TWIN DOLPHIN DR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	5		2	0	0	8												
City REDWOOD State CA Zip Code 94065	Amount of Each Disbursement this Period																				
Purpose of Disbursement POSTAGE	<table border="1"> <tr> <td>40.07</td> </tr> </table>	40.07																			
40.07																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) DHLWSH	Transaction ID: SB23.19745 Date of Disbursement																				
Mailing Address 333 TWIN DOLPHIN DR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	5		2	0	0	8												
City REDWOOD State CA Zip Code 94065	Amount of Each Disbursement this Period																				
Purpose of Disbursement POSTAGE	<table border="1"> <tr> <td>38.15</td> </tr> </table>	38.15																			
38.15																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

140.77

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A.	<p>Full Name (Last, First, Middle Initial) DHLWSH</p> <p>Mailing Address 333 TWIN DOLPHIN DR</p> <p>City REDWOOD State CA Zip Code 94065</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.19747</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 8.31</p>
B.	<p>Full Name (Last, First, Middle Initial) DHLWSH</p> <p>Mailing Address 333 TWIN DOLPHIN DR</p> <p>City REDWOOD State CA Zip Code 94065</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.19783</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 225.16</p>
C.	<p>Full Name (Last, First, Middle Initial) DHLWSH</p> <p>Mailing Address 333 TWIN DOLPHIN DR</p> <p>City REDWOOD State CA Zip Code 94065</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.19784</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 172.01</p>

SUBTOTAL of Disbursements This Page (optional) ►

405.48

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) DHLWSH	Transaction ID: SB23.19786 Date of Disbursement																				
Mailing Address 333 TWIN DOLPHIN DR	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	8		2	0	0	8												
City REDWOOD State CA Zip Code 94065	Amount of Each Disbursement this Period																				
Purpose of Disbursement POSTAGE	<table border="1"> <tr> <td>84.89</td> </tr> </table>	84.89																			
84.89																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) FOUR POINTS SHERATON	Transaction ID: SB23.19703 Date of Disbursement																				
Mailing Address 9750 AIRPORT BLVD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	5		2	0	0	8												
City LOS ANGELES State CA Zip Code 90045	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>722.31</td> </tr> </table>	722.31																			
722.31																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) HANNAFORD BROS CO	Transaction ID: SB23.19625 Date of Disbursement																				
Mailing Address PO BOX 1000	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												
City Portland State ME Zip Code 04104	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>66.83</td> </tr> </table>	66.83																			
66.83																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

874.03

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

<p>A.</p> <p>Full Name (Last, First, Middle Initial) HOTELSCOM</p> <p>Mailing Address 10440 N. Central Expwy Ste. 400</p> <p>City Dallas State TX Zip Code 75231</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name MIKE GRAVEL FOR PRESIDENT 2008</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.19790</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 825.54</p> <p>Category/ Type 101</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) IKON-MID ATLANTIC</p> <p>Mailing Address PO Box 827119</p> <p>City Manchester State NH Zip Code 03101</p> <p>Purpose of Disbursement TRAVEL EXPENSES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.19660</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 318.52</p> <p>Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Eleonai Israel</p> <p>Mailing Address 675 Hennessy Way</p> <p>City Bowling Green State KY Zip Code 42101</p> <p>Purpose of Disbursement EXPENSE REIMBURSEMENT TENT RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.19652</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/ Type 101</p>

SUBTOTAL of Disbursements This Page (optional)

1644.06

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Eleonai Israel

Mailing Address 675 Hennessy Way

City Bowling Green State KY Zip Code 42101

Purpose of Disbursement
CONSULTING FEES FOR COMMUNICATIONS

Candidate Name

101
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19673

Date of Disbursement

01 / 23 / 2008

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Eleonai Israel

Mailing Address 675 Hennessy Way

City Bowling Green State KY Zip Code 42101

Purpose of Disbursement
CONSULTING FEES FOR COMMUNICATIONS

Candidate Name

101
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19728

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

236.00

C.

Full Name (Last, First, Middle Initial)

ELLIOT JACOBSON

Mailing Address 1101 3RD STREET, SW
APT201

City WASHINGTON State DC Zip Code 20021

Purpose of Disbursement
CONSULTING FOR MEDIA AND FUNDRAISING

Candidate Name

101
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19748

Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

3736.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) RODRIGUEZ JOSE	Transaction ID: SB23.19644 Date of Disbursement																				
Mailing Address 1435 MONROE ST NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	9		2	0	0	8												
City WASHINGTON State DC Zip Code 20010	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONSULTING CAMPAIGN COORDINATION	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) RODRIGUEZ JOSE	Transaction ID: SB23.19709 Date of Disbursement																				
Mailing Address 1435 MONROE ST NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	7		2	0	0	8												
City WASHINGTON State DC Zip Code 20010	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONSULTING CAMPAIGN COORDINATION	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) RODRIGUEZ JOSE	Transaction ID: SB23.19734 Date of Disbursement																				
Mailing Address 1435 MONROE ST NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	2		2	0	0	8												
City WASHINGTON State DC Zip Code 20010	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONSULTING CAMPAIGN COORDINATION	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) ELEANOR JUSTICE Mailing Address 801 CHAUNCEY AVENUE	Transaction ID: SB23.19681 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 0 8</div> </div>
City State Zip Code BALTIMORE MD 21217 Purpose of Disbursement PRINTING AND STATIONARY Candidate Name <div> <div>101</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>250.00</div>
B. Full Name (Last, First, Middle Initial) KG INTERNATIONAL Mailing Address 11311 TRENTON CT City State Zip Code BRISTOW VA 20136 Purpose of Disbursement CONSULTING FOR ACCOUNTING SERVICES Candidate Name <div> <div>101</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19733 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 2 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>2000.00</div>
C. Full Name (Last, First, Middle Initial) CHRIS PETHRICK Mailing Address 16305 WOODVILLE ROAD City State Zip Code BRANDYWINE MD 20613 Purpose of Disbursement CONSULTING FOR CAMPAIGN MANAGEMENT Candidate Name <div> <div>101</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19678 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 5 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>2500.00</div>

SUBTOTAL of Disbursements This Page (optional)

4750.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) ELLEN REYNOLDS Mailing Address 7 ROBINSON LANE	Transaction ID: SB23.19666 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	8		2	0	0	8													
City MOUNT PRESENT State ME Zip Code 04660 Purpose of Disbursement RENTAL NEW HEMPSHIRE JAN08 PART OCCUPIED Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <table border="1"> <tr> <td>488.00</td> </tr> </table>	488.00																				
488.00																						
B. Full Name (Last, First, Middle Initial) ELLEN REYNOLDS Mailing Address 7 ROBINSON LANE City MOUNT PRESENT State ME Zip Code 04660 Purpose of Disbursement RENTAL NEW HEMPSHIRE JUL 07 ARREAS PAID Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.20497 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>800.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	0	8	800.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	8		2	0	0	8													
800.00																						
C. Full Name (Last, First, Middle Initial) ELLEN REYNOLDS Mailing Address 7 ROBINSON LANE City MOUNT PRESENT State ME Zip Code 04660 Purpose of Disbursement RENTAL NEW HEMPSHIRE AUG 07 ARREARS PAID Candidate Name MIKE GRAVEL FOR PRESIDENT 2008 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.20498 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>800.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	0	8	800.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	8		2	0	0	8													
800.00																						

SUBTOTAL of Disbursements This Page (optional)

2088.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ELLEN REYNOLDS

Mailing Address 7 ROBINSON LANE

City MOUNT PRESENT State ME Zip Code 04660

Purpose of Disbursement
RENTAL NEW HEMPSHIRE OCT ARREARS PAID

Candidate Name
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House ☐ Senate ☒ President
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: SB23.20499

Date of Disbursement

01 / 18 / 2008

Amount of Each Disbursement this Period

800.00

B.

Full Name (Last, First, Middle Initial)

ELLEN REYNOLDS

Mailing Address 7 ROBINSON LANE

City MOUNT PRESENT State ME Zip Code 04660

Purpose of Disbursement
RENTAL NEW HEMPSHIRE NOV 07 ARREARS PAID

Candidate Name
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House ☐ Senate ☒ President
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: SB23.20500

Date of Disbursement

01 / 18 / 2008

Amount of Each Disbursement this Period

800.00

C.

Full Name (Last, First, Middle Initial)

ELLEN REYNOLDS

Mailing Address 7 ROBINSON LANE

City MOUNT PRESENT State ME Zip Code 04660

Purpose of Disbursement
RENTAL NEW HEMPSHIRE DEC 07 ARREARS PAID

Candidate Name
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House ☐ Senate ☒ President
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: SB23.20501

Date of Disbursement

01 / 18 / 2008

Amount of Each Disbursement this Period

800.00

SUBTOTAL of Disbursements This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.19688 Date of Disbursement																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	1		2	0	0	8												
City Lake Havasu City State AZ Zip Code 86403	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td colspan="10">188.00</td> </tr> </table>	188.00																			
188.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.19699 Date of Disbursement																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	4		2	0	0	8												
City Lake Havasu City State AZ Zip Code 86403	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td colspan="10">97.50</td> </tr> </table>	97.50																			
97.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.19710 Date of Disbursement																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	7		2	0	0	8												
City Lake Havasu City State AZ Zip Code 86403	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td colspan="10">186.00</td> </tr> </table>	186.00																			
186.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

471.50

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	Transaction ID: SB23.19711 Date of Disbursement																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	7		2	0	0	8												
City Lake Havasu City State AZ Zip Code 86403	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td>97.50</td> </tr> </table>	97.50																			
97.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB23.19626 Date of Disbursement																				
Mailing Address 910 North Glebe Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												
City Arlington State VA Zip Code 22203	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>33.77</td> </tr> </table>	33.77																			
33.77																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) TROY ASSOCIATES	Transaction ID: SB23.19640 Date of Disbursement																				
Mailing Address 1916 Wilson Boulevard	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	0	8												
City Arlington, State VA Zip Code 22201	Amount of Each Disbursement this Period																				
Purpose of Disbursement RENTAL CAMPAIGN HEADQUARTERS	<table border="1"> <tr> <td>2982.33</td> </tr> </table>	2982.33																			
2982.33																					
Candidate Name	101 Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3113.60

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

US AIRWAYS

Mailing Address 2345 CRYSTAL DVE

City ARLINGTON State VA Zip Code 22227

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19724

Date of Disbursement

02 / 14 / 2008

Amount of Each Disbursement this Period

223.50

B.

Full Name (Last, First, Middle Initial)

VONAGE USA

Mailing Address 23 Main St.

City Holmdel State NJ Zip Code 07733

Purpose of Disbursement
TELEPHONE/INTERNET

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19751

Date of Disbursement

02 / 27 / 2008

Amount of Each Disbursement this Period

51.11

C.

Full Name (Last, First, Middle Initial)

VONAGE USA

Mailing Address 23 Main St.

City Holmdel State NJ Zip Code 07733

Purpose of Disbursement
TELEPHONE/INTERNET

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19780

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

59.41

SUBTOTAL of Disbursements This Page (optional)

334.02

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) VONAGE USA	Transaction ID: SB23.19781 Date of Disbursement																				
Mailing Address 23 Main St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	8												
City Holmdel State NJ Zip Code 07733	Amount of Each Disbursement this Period																				
Purpose of Disbursement TELEPHONE/INTERNET	<table border="1"> <tr> <td colspan="10">51.11</td> </tr> </table>	51.11																			
51.11																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.19619 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	3		2	0	0	8												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">875.30</td> </tr> </table>	875.30																			
875.30																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.19649 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	0		2	0	0	8												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">19.50</td> </tr> </table>	19.50																			
19.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

945.91

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	Transaction ID: SB23.19672 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		2	2		2	0	0	8													
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <table border="1"> <tr> <td>10.00</td> </tr> </table>	10.00																				
10.00																						
B. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19675 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>10.02</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	3		2	0	0	8	10.02
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		2	3		2	0	0	8													
10.02																						
C. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19676 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>10.02</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	3		2	0	0	8	10.02
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		2	3		2	0	0	8													
10.02																						

SUBTOTAL of Disbursements This Page (optional) ►

30.04

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.19680 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	5		2	0	0	8												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">10.10</td> </tr> </table>	10.10																			
10.10																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.19682 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	8		2	0	0	8												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">190.00</td> </tr> </table>	190.00																			
190.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.19685 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	8		2	0	0	8												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

210.10

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.19686 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	0		2	0	0	8												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">9.41</td> </tr> </table>	9.41																			
9.41																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.19696 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	4		2	0	0	8												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">555.07</td> </tr> </table>	555.07																			
555.07																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.19707 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	6		2	0	0	8												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td colspan="10">10.00</td> </tr> </table>	10.00																			
10.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

574.48

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	Transaction ID: SB23.19723 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 3 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>12.00</div>
B. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19731 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 0 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>10.00</div>
C. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19732 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 0 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>10.00</div>

SUBTOTAL of Disbursements This Page (optional) ►

32.00

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	Transaction ID: SB23.19739 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 5 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>500.00</div>
B. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19749 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 6 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>35.00</div>
C. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19752 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 7 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>70.00</div>

SUBTOTAL of Disbursements This Page (optional)

605.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City State Zip Code
Charlotte NC 28262

Purpose of Disbursement
OVERDRAFT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19754

Date of Disbursement

02 / 28 / 2008

Amount of Each Disbursement this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City State Zip Code
Charlotte NC 28262

Purpose of Disbursement
OVERDRAFT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19757

Date of Disbursement

03 / 03 / 2008

Amount of Each Disbursement this Period

70.00

C.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City State Zip Code
Charlotte NC 28262

Purpose of Disbursement
BANK CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.19758

Date of Disbursement

03 / 04 / 2008

Amount of Each Disbursement this Period

529.87

SUBTOTAL of Disbursements This Page (optional)

634.87

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	Transaction ID: SB23.19760 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>10.00</div>
B. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19762 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>140.00</div>
C. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19763 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>10.00</div>

SUBTOTAL of Disbursements This Page (optional) ►

160.00

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	Transaction ID: SB23.19764 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>10.00</div>
B. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19765 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>10.00</div>
C. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19766 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>5.00</div>

SUBTOTAL of Disbursements This Page (optional) ►

25.00

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	Transaction ID: SB23.19767 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>140.00</div>
B. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19768 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>10.00</div>
C. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement BANK CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19770 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>13.15</div>

SUBTOTAL of Disbursements This Page (optional) ►

163.15

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966	Transaction ID: SB23.19771 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div>
City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>70.00</div>
B. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19773 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 4 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>35.00</div>
C. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address P.O. Box 563966 City Charlotte State NC Zip Code 28262 Purpose of Disbursement OVERDRAFT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.19775 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>35.00</div>

SUBTOTAL of Disbursements This Page (optional)

140.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.19776 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	0	8												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGES	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: SB23.19777 Date of Disbursement																				
Mailing Address P.O. Box 563966	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	0	8												
City Charlotte State NC Zip Code 28262	Amount of Each Disbursement this Period																				
Purpose of Disbursement OVERDRAFT FEE	<table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00																			
25.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) ZORGO PRINTING SERVICE INC	Transaction ID: SB23.19663 Date of Disbursement																				
Mailing Address 131 North Main Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	7		2	0	0	8												
City Pittston State PA Zip Code 18640	Amount of Each Disbursement this Period																				
Purpose of Disbursement PRINTING AND STATIONARY	<table border="1"> <tr> <td>2147.00</td> </tr> </table>	2147.00																			
2147.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2672.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ZORGO PRINTING SERVICE INC

Mailing Address 131 North Main Street

City
Pittston

State
PA

Zip Code
18640

Purpose of Disbursement
PRINTING AND STATIONARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.19738

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1558.75

SUBTOTAL of Disbursements This Page (optional)

1558.75

TOTAL This Period (last page this line number only)

36275.70

Schedule C-P**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4621

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

30000.00

Cumulative Payment To Date

20900.00

Balance Outstanding at Close of This Period

9100.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 7D D
2 4Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

9100.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4629

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 7D D
2 4Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

3000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4622

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 9D D
2 7Y Y Y Y
2 0 0 6

12/31/2006

0.0000 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4623

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 9D D
2 7Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

100.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4726

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 0D D
2 5Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional) ▶

5000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4743

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 1D D
3 0Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

6000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4744

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 2D D
1 8Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5215

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

806.74

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

806.74

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
0 7Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

806.74

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5217

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

181.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

181.87

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
0 7Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

181.87

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5220

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

95.70

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

95.70

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 3Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

95.70

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5216

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 5Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1500.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5219

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

43.59

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

43.59

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 6Y Y Y Y
2 0 0 7

12/31/2008

0.0000 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

43.59

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5221

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 8Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5218

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

787.83

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

787.83

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 3D D
0 8Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

787.83

TOTALS This Period (last page in this line only) ▶

47615.73

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 67 / 84

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
CHRISTINE D'AMICONature of Debt (Purpose):
CONSULTING FEES FIELD REP
CTMailing Address 2612 NORTH AVE
D-9City State ZIP Code
BRIDGEPORT CT 06604

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20453

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jacobson ElliottNature of Debt (Purpose):
CONSULTING NATIONAL FIELD
DIRECTOR

Mailing Address 1001 3rd Street, SW

City State ZIP Code
Washington DC 20024

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.20419

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jacobson ElliottNature of Debt (Purpose):
CONSULTING NATIONAL FIELD
DIRECTOR

Mailing Address 1001 3rd Street, SW

City State ZIP Code
Washington DC 20024

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.20418

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional).....

7500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jacobson ElliottNature of Debt (Purpose):
CONSULTING - FUNDRAISING

Mailing Address 1001 3rd Street, SW

City State ZIP Code
Washington DC 20024

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD12.20014

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MIKE GRAVELNature of Debt (Purpose):
EXPENSE REIMBURSEMENT -
HQ RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20648

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SUSAN GRIFFINNature of Debt (Purpose):
CAMPAIGN COORDINATIONMailing Address 5520 COVINGTON CT
#106City State ZIP Code
DEARBORN MI 48126

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20436

Amount Incurred This Period

525.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

525.00

1) **SUBTOTALS** This Period This Page (optional).....

2525.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MINDI IDENNature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
COORDINATION

Mailing Address 149 S. Barrington Ave. #326

City State ZIP Code
LOS ANGELES CA 90049

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.19797

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
BECKY ISAISNature of Debt (Purpose):
CONSULTING FEE FOR FIELD
REP NV

Mailing Address 5512 VISTA RIDGE WAY

City State ZIP Code
KEARNS UT 84118

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20450

Amount Incurred This Period

1050.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RODRIGUEZ JOSENature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
FIELD ORGANIZER

Mailing Address 1435 MONROE ST NW

City State ZIP Code
WASHINGTON DC 20010

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20411

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

6550.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 RODRIGUEZ JOSE

 Nature of Debt (Purpose):
 CONSULTING FEES CAMPAIGN
 FIELD ORGANIZER

Mailing Address 1435 MONROE ST NW

City	State	ZIP Code
WASHINGTON	DC	20010

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20412

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 RODRIGUEZ JOSE

 Nature of Debt (Purpose):
 CONSULTING FEES CAMPAIGN
 FIELD ORGANIZER

Mailing Address 1435 MONROE ST NW

City	State	ZIP Code
WASHINGTON	DC	20010

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19794

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 RODRIGUEZ JOSE

 Nature of Debt (Purpose):
 CONSULTING FEES CAMPAIGN
 FIELD ORGANIZER

Mailing Address 1435 MONROE ST NW

City	State	ZIP Code
WASHINGTON	DC	20010

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20015

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

7500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.18205

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.18206

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19795

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

7500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20427

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20428

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AFIFA KLOUJNature of Debt (Purpose):
CONSULTING FEES FOR OFFICE
MANAGEMENTMailing Address 1001 3RD STREET SW
#804City State ZIP Code
WASHINGTON DC 20024

Outstanding Balance Beginning This Period

1050.00

Transaction ID: SD12.20440

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

1) **SUBTOTALS** This Period This Page (optional).....

6050.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JON KRAUSNature of Debt (Purpose):
CONSULTING FEES DEPUTY
CAMPAIGN MANAGER

Mailing Address 4702 BELMONT DR

City State ZIP Code
EMMAUS PA 18049

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.20416

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JON KRAUSNature of Debt (Purpose):
CONSULTING FEES DEPUTY
CAMPAIGN MANAGER

Mailing Address 4702 BELMONT DR

City State ZIP Code
EMMAUS PA 18049

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.20417

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JON KRAUSNature of Debt (Purpose):
CONSULTING FEES DEPUTY
CAMPAIGN MANAGER

Mailing Address 4702 BELMONT DR

City State ZIP Code
EMMAUS PA 18049

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19791

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional).....

8000.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JOE LAURIANature of Debt (Purpose):
CONSULTING FEES NATL PUBL-
ICITY DIRECTORMailing Address 205 PINEHURST AVE
#6JCity State ZIP Code
NEW YORK NY 10033

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20430

Amount Incurred This Period

1050.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
mosier lynneNature of Debt (Purpose):
CONSULTING FEES CALIFORNIA
COORDINATOR

Mailing Address 76 patrick way

City State ZIP Code
half moon bay CA 94019

Outstanding Balance Beginning This Period

5000.00

Transaction ID: SD12.19793

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SKYLER MCKINLEYNature of Debt (Purpose):
CONSULTING FOR INFORMATI-
ON TECHNOLOGY

Mailing Address 1815 S. QUEEN WAY

City State ZIP Code
LAKEWOOD CO 80232

Outstanding Balance Beginning This Period

5000.00

Transaction ID: SD12.20457

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) **SUBTOTALS** This Period This Page (optional).....

11050.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CASEY MCLLVAINNature of Debt (Purpose):
CONSULTING ALTERNATIVE DE-
BATE TECHNOLOGY

Mailing Address 225 LYCEUM AVE

City State ZIP Code
PHILADELPHIA PA 19128

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20455

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DAVID NELSON VAN-DETTENature of Debt (Purpose):
CONSULTING FIELD REP FL

Mailing Address 1013 RIDGE ROAD

City State ZIP Code
LARGO FL 33770

Outstanding Balance Beginning This Period

525.00

Transaction ID: SD12.20444

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

525.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DAVID NELSON VAN-DETTENature of Debt (Purpose):
CONSULTING FEES FIELD REP
FL

Mailing Address 1013 RIDGE ROAD

City State ZIP Code
LARGO FL 33770

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20446

Amount Incurred This Period

1050.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

1) **SUBTOTALS** This Period This Page (optional).....

2075.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

10000.00

Transaction ID: SD12.18207

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20421

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20422

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

15000.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 77 / 84

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20423

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20424

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CHRIS PETHRICKNature of Debt (Purpose):
CONSULTING FEES FOR CAMPA-
IGN MAGT

Mailing Address 16305 WOODVILLE ROAD

City State ZIP Code
BRANDYWINE MD 20613

Outstanding Balance Beginning This Period

7498.00

Transaction ID: SD12.20012

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7498.00

1) **SUBTOTALS** This Period This Page (optional).....

12498.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 CHRIS PETHRICK

 Nature of Debt (Purpose):
 CONSULTING FEES FOR CAMPA-
 IGN MAGT

Mailing Address 16305 WOODVILLE ROAD

City	State	ZIP Code
BRANDYWINE	MD	20613

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20246

Amount Incurred This Period

7498.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7498.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 CHRIS PETHRICK

 Nature of Debt (Purpose):
 CONSULTING FEES FOR CAMPA-
 IGN MAGT

Mailing Address 16305 WOODVILLE ROAD

City	State	ZIP Code
BRANDYWINE	MD	20613

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20425

Amount Incurred This Period

7498.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7498.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 CHRIS PETHRICK

 Nature of Debt (Purpose):
 CONSULTING FEES FOR CAMPA-
 IGN MAGT

Mailing Address 16305 WOODVILLE ROAD

City	State	ZIP Code
BRANDYWINE	MD	20613

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20426

Amount Incurred This Period

3749.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3749.00

1) **SUBTOTALS** This Period This Page (optional).....

18745.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
GEORGE REBHNature of Debt (Purpose):
PHOTOGRAPH

Mailing Address 4899 35TH RD NORTH

City State ZIP Code
ARLINGTON VA 22207

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20448

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ELLEN REYNOLDSNature of Debt (Purpose):
RENTAL NEW HAMPSHIRE - PA-
RT OCCUPIED

Mailing Address 7 ROBINSON LANE

City State ZIP Code
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

800.00

Transaction ID: SD12.20485

Amount Incurred This Period

0.00

Payment This Period

800.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ELLEN REYNOLDSNature of Debt (Purpose):
RENTAL NEW HAMPSHIRE - PA-
RT OCCUPIED

Mailing Address 7 ROBINSON LANE

City State ZIP Code
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

800.00

Transaction ID: SD12.20486

Amount Incurred This Period

0.00

Payment This Period

800.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

2000.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 ELLEN REYNOLDS

 Nature of Debt (Purpose):
 RENTAL NEW HAMPSHIRE - PA-
 RT OCCUPIED

Mailing Address 7 ROBINSON LANE

City	State	ZIP Code
MOUNT PRESENT	ME	04660

Outstanding Balance Beginning This Period

800.00

Transaction ID: SD12.20494

Amount Incurred This Period

0.00

Payment This Period

800.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 ELLEN REYNOLDS

 Nature of Debt (Purpose):
 RENTAL NEW HAMPSHIRE- PART
 OCCUPIED

Mailing Address 7 ROBINSON LANE

City	State	ZIP Code
MOUNT PRESENT	ME	04660

Outstanding Balance Beginning This Period

800.00

Transaction ID: SD12.20495

Amount Incurred This Period

0.00

Payment This Period

800.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 ELLEN REYNOLDS

 Nature of Debt (Purpose):
 RENTAL NEW HAMPSHIRE - PA-
 RT OCCUPIED

Mailing Address 7 ROBINSON LANE

City	State	ZIP Code
MOUNT PRESENT	ME	04660

Outstanding Balance Beginning This Period

800.00

Transaction ID: SD12.20496

Amount Incurred This Period

0.00

Payment This Period

800.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
George RipleyNature of Debt (Purpose):
CONSULTING FEES FIELD REP
DC

Mailing Address 1425 Monroe S. NW

City State ZIP Code
Washington DC 20010

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20447

Amount Incurred This Period

525.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

525.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
APRIL SHARPLEYNature of Debt (Purpose):
CONSULTING CAMPAIGN COORD-
INATION

Mailing Address 3801 TATTERSHALL LANE

City State ZIP Code
AUSTIN TX 78727

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.18204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
APRIL SHARPLEYNature of Debt (Purpose):
CONSULTING CAMPAIGN COORD-
INATION

Mailing Address 3801 TATTERSHALL LANE

City State ZIP Code
AUSTIN TX 78727

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19798

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

1) **SUBTOTALS** This Period This Page (optional).....

4525.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
DAN SWARTZNature of Debt (Purpose):
FILM PRODUCTIONMailing Address 95 HORATIO ST
APT 406City State ZIP Code
NEW YORK NY 10014

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20432

Amount Incurred This Period

1050.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RICH SWARTZNature of Debt (Purpose):
FILM PRODUCTIONMailing Address 95 HORATIO ST
APT 406City State ZIP Code
NEW YORK NY 10014

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20434

Amount Incurred This Period

1050.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING FOR DATABASE
MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.18200

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional).....

5100.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING FOR DATABASE
MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.18201

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING FOR DATABASE
MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.18202

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING FOR DATABASE
MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.19796

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) SUBTOTALS This Period This Page (optional).....

9000.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
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☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 TELENOMICS GROUP

 Nature of Debt (Purpose):
 CONSULTING FOR DATABASE
 MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City	State	ZIP Code
ST LOUISE	MO	63132

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20420

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1000.00

2) **TOTALS** This Period (last page this line number only)..... ▶

126618.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

47615.73

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)..... ▶

174233.73